



Department of Public Safety and Correctional Services

Maryland Commission on Correctional Standards

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THOMAS D. REECE
CHAIRPERSON

VERONICA MOORE
ACTING EXECUTIVE DIRECTOR

274th Commission (Virtual) Meeting

March 25, 2021

Minutes

MEMBERS PRESENT:

Major Thomas D. Reece, Administrator Calvert County Detention Center,
Chairperson
Shakia Word, Budget Analyst, Department of Budget and Management, representing
Secretary David R. Brinkley, Vice Chairperson
Dr. Maria Elmo, Healthcare Representative
Wayne Hill, Deputy Secretary of Operations, Department Public Safety and
Correctional Services
Beverly Hughes, Assistant Attorney General, representing Attorney General
Brian E. Frosh
Terry Kokolis, Director, Talbot County Department of Corrections
Nelson Reichart, Deputy Secretary, Department of General Services, Representing
Secretary Ellington E. Churchill, Jr.
Michael Resnick, Commissioner, Division of Pretrial Detention Services
Montrell Spence, Citizen Member

MEMBERS ABSENT:

Delores Alexander, Citizen Member

STAFF PRESENT:

Veronica Moore, Acting Executive Director
Cheryle Moyer, Senior Correctional Program Specialist
Regina Russell, Correctional Program Specialist
Brian Raivel, Administrative Officer
LaDonna Newman, Management Associate

VIRTUAL GUESTS:

Anthony Gaskins, Department of Public Safety and Correctional Services
Annie Harvey, Acting Commissioner, Division of Correction
Director Angela Talley, Director, Montgomery County Department of Corrections
and Rehabilitation
Warden Suzy Malagari, Montgomery County Detention Center/Montgomery County
Correctional Facility
Deputy Warden Martin Westby, Montgomery County Detention Center/Montgomery
County Correctional Facility
Deputy Warden Ivan Downing, Montgomery County Detention Center/Montgomery
County Correctional Facility

Accreditation Manager Chris Auen, Montgomery County Detention Center/
Montgomery County Correctional Facility
Captain Alinda, Nash, Montgomery County Detention Center/Montgomery County
Correctional Facility
Chief Kaye Beckley, Management Services, Montgomery County Detention Center/
Montgomery County Correctional Facility
Warden Charles Scott, Caroline County Detention Center
Deputy Warden Nicole Jackson, Caroline County Detention
Sergeant Timothy Brewer, Caroline County Detention Center
Mr. Richard Moorner, Jr., Caroline County Detention Center
Ms. Patricia Bartz, Management Associate, Caroline County Detention Center
Warden Jama Acuff, Maryland Correctional Institution-Jessup
Fateema Mobley, Maryland Correctional Institution-Jessup
Shanea Ross, Maryland Correctional Institution-Jessup
Chinelo Ukelegbu, Maryland Correctional Institution-Jessup
Warden Margaret Chippendale, Baltimore City Correctional Center
Facility Administrator Adisa-Thomas, Baltimore City Correctional Center
Director Corenne Labbe', Prince George's County Department of Corrections
Assistant Director Gregory K. Smith, Prince George's County Department of Corrections
Chief Guy Merritt, Prince George's County Community Release Center
Chief William D. Frazier, Prince George's County Department of Corrections
Ms. Alecia Creighton, Prince George's County Department of Corrections

The Maryland Commission on Correctional Standards held the 274th Commission Meeting (Virtual Meeting) via Google Meet, due to the State of Maryland's Elevated Level II status regarding COVID-19. The agenda was as follows:

1. Welcome/Introduction/Remarks
2. Approval of Minutes, January 28, 2021
3. Chair's Comments
4. Acting Executive Director's Comments
5. Continuing Business/Monitoring Reports
 - Montgomery County Correctional Facility
 - Montgomery County Detention Center
 - Caroline County Detention Center
 - Maryland Correctional Institution-Jessup
 - Baltimore City Correctional Center
 - Prince George's County Department of Corrections
 - Prince George's County Community Corrections Center
6. Announcements
7. Adjournment

1. WELCOME/INTRODUCTION/REMARKS

Chairperson T.D. Reece officially called to order the 274th Commission (Virtual) Meeting at 10:00 AM. Chairperson Reece welcomed everyone to the 274th Commission (Virtual) Meeting. Chairperson Reece stated that the meeting would be recorded and minutes would be taken of the meeting. Chairperson Reece reminded members and guests to mute their telephones and computer microphones to reduce the amount of background noise and interruptions during the meeting. Chairperson Reece explained the virtual meeting guidelines regarding how the meeting would be conducted. Chairperson Reece advised the Commission members regarding the voting process for the reports. He stated that the Commission member must state his/her name for the motion and prior to the second to seal the vote for the approval of the report. Chairperson Reece stated that he will only address “nay” responses regarding the voting process. Chairperson Reece requested that each guest state their name and title prior to speaking for the purpose of knowing who is speaking/responding to a question. Chairperson Reece stated that the Recognition of Achievement awards approved at the meeting will be forwarded to the managing officials sometime after the meeting. Chairperson Reece extended congratulations to Mr. Wayne Hill on his recent appointment as the Deputy Secretary of Operations, Department of Public Safety and Correctional Services. Chairperson Reece also extended congratulations to Ms. Annie Harvey on her appointment as the Acting Commissioner of the Division of Correction. Chairperson Reece deferred to Acting Executive Director Veronica Moore to conduct a Roll Call (attendance) of the Commission members for the purpose of a quorum for the virtual meeting which was followed by a Roll Call regarding the attendance of the facility representatives and MCCS staff who were present at the meeting.

2. APPROVAL OF MINUTES – JANUARY 28, 2021

Chairperson T.D. Reece entertained a virtual motion/vote on the approval of the Minutes regarding the January 28, 2021 meeting. Assistant Attorney General Beverly Hughes made a motion to approve the Minutes of the January 28, 2021 meeting and Director Terry Kokolis seconded. The unanimous response of silence denoted the approval of the Minutes of the January 28, 2021 Commission (Virtual) meeting.

3. CHAIR’S COMMENTS

Chairperson T.D. Reece acknowledged and expressed his appreciation to the Commission members regarding their outstanding attendance at the remote Commission meetings. Chairperson Reece commented that the Commission members’ attendance has exceeded the majority for a quorum regarding the remote meetings held thus far, since July 2020. Chairperson Reece commented that a quorum ensures that the Commission is able to carry out its critical functions serving both the community and the corrections community and the overall community as a whole. Chairperson Reece commented that the remote meetings are a big plus in that individuals do not have to travel to the meeting site, especially during the winter months. Chairperson Reece expressed appreciation to the members for their attendance as well as everyone’s attendance at the remote meetings. Chairperson Reece commented that the Commission is looking forward to beginning the process of the full remote audits. He stated that with everyone’s cooperation, he believes the remote audits will be a huge success. Chairperson Reece announced that effective March 19, 2021, the MCCS Office has relocated to the Reisterstown Plaza Office Complex.

4. ACTING EXECUTIVE DIRECTOR'S COMMENTS

Acting Executive Director Moore provided an update on the MCCS developments. Acting Executive Director Moore commented that MCCS has developed the Fiscal Year 2022 Audit Schedule and the audit schedule has been disseminated to those facilities who will be affected by those audits, along with the Remote Audit Process policy which was incorporated into the entire process. Acting Executive Director Moore commented that both documents were disseminated in the latter part of February 2021 to those facilities scheduled to be audited in fiscal year 2022. Acting Executive Director Moore commented that the MCCS Remote Audit Process policy (which was adopted by the Commission) was disseminated to the State and Local facilities on March 1, 2021. Acting Executive Director Moore reported that the MCCS staff have been able to meet with some of the facilities who are at various stages of the remote auditing process. Acting Executive Director Moore commented that those facilities who are in various stages of the audit process may have been facilities whose audits may have still been scheduled, cancelled, rescheduled or are pending an audit in fiscal year 2022. She stated that the meetings with the facilities went very well. Acting Executive Director Moore stated that more questions are expected as individuals get involved in the entire process. Acting Executive Director Moore commented that MCCS staff will remain available to provide technical assistance.

5. CONTINUING BUSINESS-MONITORING REPORTS

- **MONTGOMERY COUNTY CORRECTIONAL FACILITY**

Mr. Brian Raivel reported that on February 9, 2021, he conducted a remote monitoring review regarding the Montgomery County Correctional Facility. The purpose was to review the standards found in non-compliance at the initial audit conducted in September 2019. This was the first monitoring review since the audit. The documentation to substantiate compliance with the standards was submitted, via email, by Sergeant Christopher Auen (Audit Coordinator) at the request of MCCS. The results of the monitoring period from August 1, 2020 through February 1, 2021, were as follows: Standard .02 K (4, 6, 7) Control of Medical and Dental Instruments was found to be in compliance. Records for the weekly inventory and usage of needles and syringes in the dental department were provided for the monitoring period. The Dental instruments, needles, and syringes are not maintained at the facility. The Dentist is allowed to bring in needed instruments, needles, and syringes, upon entry to the facility. The Dental Instrument Inventory and Inspection Logs for the monitoring period indicate: The date, name of dentist bringing dental instruments in, the instrument type to include needles and syringes, condition, and number of instruments brought in to the facility, the time, the condition, number of instruments, time leaving the facility, the correctional staff member searching and observing the instruments. Based on the records submitted for review, dental instruments, including needles and syringes, are being accounted for, upon entry and exiting the facility, as required by policy and the standard. Standard .03 C Health Inspections was found to be in compliance. The Montgomery County Department of Health and Human Services Food Service Inspection report was reviewed, a comprehensive inspection was conducted on August 26, 2020 with 3 violations noted. One violation was corrected on site and the others were corrected by December 17, 2020.

The annual health inspection was conducted by the Health Department, as required by the standard. Inspection reports were reviewed from other regulatory agencies. An annual fire inspection was conducted by the Montgomery County Division of Fire Prevention on August 27, 2019, with no violations noted. Dietary menus were reviewed and approved on January 15, 2021 by Elaine T Dunn, Dietician (Lic. #D01966). The Montgomery County Division of Risk Management, Safety Section conducted an Occupational Safety and Health inspection at the facility, on October 16, 2017. The inspection cited nine violations, which were abated by July 2, 2018. The facility did not have a MOSH inspection conducted in 2019. The Montgomery County Correctional Facility requested an annual fire safety inspection on January 20, 2021 for an inspection; but, due to the current COVID-19 restrictions, the county Division of Fire Prevention is not conducting fire inspections, due to the temporary suspension. MCCS will address the facility's compliance with Standard .02 A Fire Safety Inspections, and .02 Q MOSH Inspections at the next scheduled MCCS audit. After a thorough review of the secondary documentation for the two non-compliant standards, the facility was found to be in compliance with all of the standards for an Adult Community Corrections Center. The Montgomery County Correctional Facility is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Montgomery County Correctional Facility. Warden Suzy Malagari commented that the administration and staff were appreciative of the auditors' feedback, recommendations, guidance and patience throughout the audit process. Warden Malagari said that last year has been a challenging year for everyone but they are appreciative of this valuable opportunity.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. There were no questions.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Deputy Secretary Wayne Hill made a motion to approve the monitoring report and grant the Recognition of Achievement award and Commissioner Michael Resnick seconded. The unanimous response of silence denoted the approval of the monitoring report and Recognition of Achievement award. The vote to approve the monitoring report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement.

- **MONTGOMERY COUNTY DETENTION CENTER**

Mr. Brian Raivel reported that on February 9, 2021, he conducted a remote monitoring review regarding the Montgomery County Detention Center. The purpose was to review the standards found in non-compliance at the initial audit conducted in October 2019. This was the first monitoring review since the audit. The documentation to substantiate compliance with the standards was submitted, via email, by Sergeant Christopher Auen (Audit Coordinator) at the request of MCCS. The results of the monitoring period from August 1, 2020 through February 1, 2021, were as follows: Standard .02 C (5) Disaster Plans was found to be in compliance. The Montgomery County Department of Corrections and Rehabilitation Montgomery County Detention Center Emergency Drill Reports for the monitoring period were reviewed. Fire drills

were conducted in all areas of the facility, which closely simulated emergencies and included inmates when security conditions allowed, as required by the standard. It is strongly recommended that reports provide written detail to explain which actions staff took during the drill. The report should inform if policy was followed and staff and inmates, who were evacuated, were familiar with their duties and responsibilities, during an actual emergency. After a review of the drill reports, it was determined that the facility was compliant with the standard. Standard .04 I (3, 4) Inmate Property Management was found to be in compliance. A review of the Montgomery County Department of Correction & Rehabilitation Confiscated Property Receipt (Form DCA-14B) was conducted for the monitoring period. The forms list the items confiscated by each specific inmate, the date confiscated, the confiscated officer's name and ID number, and the signature of the inmate upon return of property. These forms demonstrate that the Montgomery County Detention Center's inmates received their confiscated property, with the inmate's signature as acknowledgment of receipt, as required by the standard. The Montgomery County Correctional Rehabilitation Semi-Inventory Inmate Property Records were provided and reviewed. These property records list the inmate's name, the property bag belonging to that inmate, and the name and initials of the staff member that verified the inmate property was accounted for semi-annually, as required by the standard. Standard .08 G Training and Training Awareness was found to be in compliance. A listing of Detention Center staff with CPR certification dates was reviewed. The documentation demonstrates that the Mandated Staff received their CPR training in the time frame as required. A listing of civilian staff was compared to records of annual training received. These annual training records demonstrated that the Montgomery County Detention Center civilian staff received training in disaster plan awareness, as required by the standard. Inspection reports were reviewed from other regulatory agencies. The Maryland State Fire Marshal conducted a fire inspection, on June 27, 2019, with two cited violations, the violations were corrected and a re-inspection was conducted on September 11, 2019. Dietary menus were reviewed and approved on January 15, 2021 by Eliane T Dunn, Dietician (Lic. #D01966). The Montgomery County Department of Health and Human Services Food Service Inspection report was reviewed, a comprehensive inspection was conducted on February 10, 2021 with 5 violations noted. The violations were corrected by February 16, 2021. The Montgomery County Division of Risk Management, safety Section conducted an Occupational Safety and Health inspection at the facility, on January 18, 2018. The inspection cited nine violations, which were abated by July 2, 2018. Montgomery County Audit Coordinator Due to the current COVID 19 restrictions, agencies conducting state required inspections are temporarily suspended. The Montgomery County Detention Center contacted the Fire Marshal's office on February 17, 2020 and on January 22, 2021 to get an inspection. However, on both occasions, they were informed both that fire safety inspections were not being conducted. MCCA will address the facility's compliance with Standard .02 A Fire Safety Inspections, .02 Q MOSH Inspections, and .03 C Health Inspection and at the next scheduled MCCA audit. After a thorough review of the secondary documentation for the three non-compliant standards, the facility was found to be in compliance with all of the standards for an Adult Detention Center. The Montgomery County Detention Center is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Montgomery County Detention Center. Deputy Warden Martin Westby expressed appreciation to the audit team for the remote auditing review process. Deputy Warden Westby stated that in times like these, it is good to have the auditors identify areas of improvement. Deputy Warden Westby stated that the administration and staff were appreciative of the time, energy and effort that the auditors put into conducting the audit and ensuring the facility is in compliance with the standards. Deputy Warden Westby thanked the Standards Commission staff and extended appreciation to Mr. Brian Raivel for his input and guidance throughout the audit process.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. Chairperson Reece raised a question regarding the noncompliance related to standard .04 I (3, 4) Inmate Property Management. Deputy Warden Westby responded that when the inmate property was initially confiscated and signed off on by the inmate and the officer who confiscated the property, when the property was returned upon release, a signature was not always on all of the forms. Deputy Warden Westby stated that the forms were in triplicate and a signature may have been on one of the forms but not all of the forms (original form). Chairperson Reece requested clarification that the issue regarding inmate property took place in the processing area. Deputy Warden Westby responded that the issue occurred upon release of the inmate and is where the signature issue came up. Deputy Warden Westby stated that upon release, the signature was not always on the form. Deputy Warden Westby assured the Commission members that the process has been corrected.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Director Terry Kokolis made a motion to approve the monitoring report and grant the Recognition of Achievement award and Commissioner Michael Resnick seconded. The unanimous response of silence denoted the approval of the monitoring report and Recognition of Achievement award. The vote to approve the monitoring report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement.

- **CAROLINE COUNTY DETENTION CENTER**

Mr. Brian Raivel reported on February 11, 2021, he conducted a remote monitoring review regarding the Caroline County Detention Center. The purpose was to review the three standards found in non-compliance at the initial audit conducted in November 2019. This was the first monitoring review since the audit. The documentation to substantiate compliance with the standards was submitted, via email, by Sergeant Timothy Brewer (Audit Coordinator) at the request of MCCS. The results of the monitoring period from August 1, 2020 through February 1, 2021, were as follows: Standard .02 K (3, 4, 6) Control of Medical and Dental Instruments was found to be in compliance. A review was conducted of the Sharp Shift Inventory Logs, the Medical Instrument and Equipment forms, the Medical Instrument Weekly and Quarterly Inventory and Inspection forms and Sharps Usage Control Logs to assess compliance with the standard for the monitoring period. Remote physical inventories were conducted for medical instruments and needles and syringes on February 11, 2021 and February 18, 2021. All medical instruments and needles and syringes were accounted for according to the remote physical

inventories, the master list and inventory records. The Sharp Shift Inventory Logs, the Medical Instrument Weekly and Quarterly Inventory and Inspection forms demonstrated that staff conducted weekly inventories and inspections, as well as, a quarterly inspection of medical instruments and needles and syringes. The Sharps Usage Control Logs provided required documentation of the use of needles and syringes, during the monitoring period. Based on the review of the required documentation and the remote physical inventories, quarterly inspections, weekly inventories and recording of needle and syringe usage were conducted during the monitoring period and the facility has proven compliance with the standard. Standard .03 F Special Diets was found to be in compliance. A review of the Trinity Services Group Medical Diet Orders was conducted for the monitoring period. There were no religious diets requested by the inmates during the monitoring period. Orders written by Medical professional demonstrated that medical diets were initiated, provided and renewed, during the monitoring period, as required by the standard. Standard .03 F Special Diets was to be in compliance. A review of the Trinity Services Group Medical Diet Orders was conducted for the monitoring period. There were no religious diets requested by the inmates during the monitoring period. Orders written by Medical professional demonstrated that medical diets were initiated, provided and renewed, during the monitoring period, as required by the standard. Standard .03 C Health Inspections was found to be in compliance. On September 13, 2020, the Maryland Department of Health conducted a comprehensive health inspection of the Caroline County Detention Center's kitchen. The inspection noted seven deficiencies, two of which were corrected on site. The remaining five deficiencies were corrected on November 13, 2020. The Caroline County Detention Center's Kitchen was inspected and all deficiencies were corrected; therefore, the facility has demonstrated compliance with the standard. Inspection reports were reviewed from other regulatory agencies. The Maryland State Fire Marshal conducted a fire inspection, on October 7, 2019, with no cited violations. Dietary menus were reviewed and approved on January 12, 2020 by Jennifer Sowers, Dietician (Lic. #L002552). The Maryland Department of Labor, Licensing, and Regulations conducted a MOSH inspection at the facility, on August 5, 2020. The inspection cited one violation, which was abated on site. Emails were sent to the Fire Marshall's office on October 29, 2020 and January 19, 2021 to schedule an inspection; but, due to the current COVID 19 restrictions, State Fire Marshal's Office is not conducting fire inspections, which are currently suspended. MCCS will address the facility's compliance with Standard .02 A Fire Safety Inspections, at the next scheduled MCCS audit. After a thorough review of the secondary documentation for the three non-compliant standards, the facility was found to be in compliance with all of the standards for an Adult Detention Center. The Caroline County Detention Center is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Caroline County Detention Center. Warden Charles Scott expressed appreciation to the audit team for their guidance and assistance throughout the audit process.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. Assistant Attorney General Beverly Hughes inquired about the deficiencies regarding standard .03 C Health Inspections. Sergeant Timothy Brewer responded that the noncompliance was related to a rack located in the freezer that contained rust in the corner of the rack. Sergeant Brewer stated that the facility was advised to sand the area on the rack and repaint it. Sergeant Brewer reported that the other deficiency involved a stain on the floor. Sergeant Brewer reported that the deficiencies were all minor in nature. He reported that the noted deficiencies were repaired and the paperwork was submitted to the state to substantiate completion.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Director Terry Kokolis made a motion to approve the monitoring report and grant the Recognition of Achievement award and Deputy Secretary Wayne Hill seconded. The unanimous response of silence denoted the approval of the monitoring report and Recognition of Achievement award. The vote to approve the monitoring report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement.

• **MARYLAND CORRECTIONAL INSTITUTION-JESSUP**

Correctional Program Specialist Regina Russell reported that she conducted a remote monitoring review of the Maryland Correctional Institution-Jessup. Correctional Program Specialist Russell reported that Due to the State's Elevated Level II operational status as a result of COVID-19, the required documentation was electronically submitted to MCCS for review of the standards found in non-compliance at the initial audit conducted in November 2019. This was the first monitoring review since the audit. Sergeant Fateema Mobley (Audit Coordinator) electronically submitted the required documentation for the monitoring review on January 25 - 26, 2021. Physical inventories were conducted on February 17, 2021, remotely for the required standards to support accountability. The results of the monitoring period from August 1, 2020 through February 1, 2021 were as follows: Standard .02 K (4, 6) Control of Medical and Dental Instruments was found to be in compliance. A review was conducted of the MCI-J Emergency Red Bag Equipment and Supplies forms for the monitoring period. The forms indicated the quantity, item, expiration date and location of the equipment and supplies within bag. A remote inventory of the Emergency Red Bag Equipment and Supplies was conducted on February 18, 2021. The review of the documentation and the remote inventory demonstrated accurate accountability, as required by the standard. Reviews were conducted of the Inventory of Sharps/Syringes and Medical Supplies forms for accountability of the weekly inventories of the bulk needles and syringes. The forms denoted the item received in stock, inventory count, requested amount and disbursing information. The records confirmed that the weekly inventories were conducted at a minimum of four times per month. A remote inventory of the bulk needles and syringes was conducted on February 18, 2021. The review of the documentation and the remote inventory demonstrated accurate accountability, as required by the standard. The Sharps Usage forms for the daily usage of needles and syringes listed the type, date; inmate's name, amount used, amount left and nurse's signature were reviewed. The review confirmed that precise records were maintained for the monitoring period. A remote inventory of the daily usage of needles and syringes was conducted on February 18, 2021. The review of the documentation and the remote inventory demonstrated accurate accountability, as required by the standard. Standard .04 G Inmate Bedding and Linen was found to be in compliance. A review was conducted of the MCI-J Requisition for Bed Roll and the MCI-J DOC Intake, Transfer, Release Report to confirm a record of issue and return of inmate bedding and linen. The forms listed the inmates' name, SID number, and housing location and provided a list of bedding and linen items provided, with the inmate and staff's signature and date. The review of this documentation demonstrated accountability for the entire monitoring period for receipt of inmate bedding and linen, as required by the standard. Inspection reports were reviewed from other regulatory agencies. The Maryland Department of Health and Mental Hygiene

conducted a comprehensive inspection on September 12, 2019 with noted violations that were corrected on site. A monitoring visit was conducted on January 30, 2020 with noted violations. On February 27, 2020, the facility reported the completion of noted violations that included the installation of caulking, as reported to the 3-compartment sink area, a damaged floor tile, a juncture between the floor and wall and the installation of a new kick plate on the walk-in box located in the Prep Room. On April 21, 2020, the facility reported the completion of replacement gaskets to the A & B lines for the pass-through fridge. On May 17, 2020, the facility reported the completion of a required repair for a leaking ceiling in the Kitchen area. A copy of an email from Clifton Spriggs, Acting Correctional Dietary Manager to Ian Jeffers, Anne Arundel County Department of Health dated August 20, 2020 was submitted as a documented request for an inspection scheduling date. As of the date of this report, a new inspection date has not been provided. The menus were approved by Rudeine Demissie, Correctional Dietary Manager (Lic. #B00102), on June 10, 2019, for FY 2020. A MOSH Inspection was conducted, on August 9, 2019, by George Penyak, with noted violations that were abated on site at the time of the inspection. The State Fire Marshal's Office conducted an inspection on July 29, 2019 with noted violations. A compliance plan was submitted to MCCS, dated July 2019. The facility provided a copy of an email submitted by Lieutenant Cynthia Moore, Environmental Compliance Safety Officer, dated September 24, 2020 to William Jiles, Fire Safety Inspector, as an attempt to schedule an annual inspection date. The noted violations for a fire alarm in trouble in Building I, and the installation of sprinkler heads in Building K, School and the Library were completed on October 1, 2020. The sprinkler system located in the Warehouse was installed but is pending re-inspection. Due to the current COVID 19 restrictions, the Fire Marshal's Office and Health Department inspections have been suspended. MCCS will address the facility's compliance with Standard .02 A Fire Safety Inspections and .03 C Health Inspection, at the next scheduled MCCS audit. After a thorough review of the secondary documentation for the two non-compliant standards, the facility was found to be in compliance with all of the standards of an Adult Correctional Institution. The Maryland Correctional Institution-Jessup is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Maryland Correctional Institution-Jessup. Warden Jama Acuff thanked the Standards Commission for their assistance regarding the audit. Warden Acuff also extended special thanks to the audit manager and audit coordinator (Fateema Mobley and Chinelo Ukelegbu, respectively) for the hard work they put into bringing the facility into compliance with the standards.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. There were no questions presented.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Commissioner Michael Resnick made a motion to approve the monitoring report and grant the Recognition of Achievement award and Director Terry Kokolis seconded. The unanimous response of silence denoted the approval of the monitoring report and Recognition of Achievement award. The vote to approve the monitoring report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement. Deputy Secretary Wayne Hill and Acting Commissioner Annie Harvey abstained from the voting process.

- **BALTIMORE CITY CORRECTIONAL CENTER**

Correctional Program Specialist Regina Russell reported that on February 17, 2021, she conducted a remote monitoring review regarding the Baltimore City Correctional Center. Correctional Program Specialist Russell reported that Due to the State's Elevated Level II operational status as a result of COVID-19, the required documentation was electronically submitted to MCCS for review of the standard found in non-compliance at the initial audit conducted in December 2019. This was the first monitoring review since the audit. On February 2, 2021, Sergeant Evette Neaves (Audit Coordinator) electronically submitted the required documentation for the monitoring review and a physical inventory was conducted remotely on February 4, 2021. The results of the monitoring period from August 1, 2020 through February 1, 2021, are as follows: Standard .02 K (6) Control of Medical and Dental Instruments – Compliance - A review was conducted of the Baltimore City Correctional Center's Daily Sharps Inventory forms for the 23g push button lancets for the monitoring period. The forms denoted the date, Time, Detainee's Name, Number, Beginning Balance, Amount Used, Amount Wasted, Remaining Balance and Signature. The forms were cross referenced with the Baltimore City Correctional Center Quarterly Sharps Inventory Control Forms for the monitoring period. Based on the review of the information provided, it was confirmed that needle and syringe usage records for the 23g push button lancets were maintained, as required by the standard. A remote physical inventory of the bulk supply of 23g push button lancets located in the Storage Cabinet in the Medical Unit's Doctor's Office, conducted on February 4, 2021 demonstrated accountability, as required by the standard. Inspection reports were reviewed from other regulatory agencies. Dietary Menus were reviewed and approved on May 24, 2020 by Scott Steininger, Dietitian (License #D01350). A Maryland Occupational Safety Hazard Inspection (MOSH) Inspection was conducted on March 1, 2018 by George Penyak with noted violations. The violations were abated on October 29, 2019. A Fire Safety Inspection was conducted on October 29, 2019, with one noted violation. A purchase order, submitted for the replacement of the hood system in the Officer's Dining Room, is awaiting contract scheduling once approved through finance. A copy of a memo submitted by Sergeant Evette Neaves to Facility Administrator Damilare Adisa dated October 28, 2020 advised that William Jiles, Fire Safety Inspector, stated that there would not be an inspection for the 2020 year due to COVID-19 restrictions. The Fire Marshal's inspection has not been scheduled or conducted, as of the date of this report. The Baltimore City Health Department conducted a Comprehensive inspection on December 12, 2019 and noted violations that were abated on site. An annual health inspection was not conducted at the Baltimore City Correctional Center's dietary department in 2020, as required by the standard and COMAR. A copy of an email from Michael Young, Acting Correctional Dietary Manager to reported staff advising notification that the Baltimore City Health Department had suspended the scheduling of inspection dates as of March 2020 due to the current COVID 19 restrictions was submitted as a documented attempt to schedule an inspection. As of the date of this report, a new inspection date has not been provided. MCCS will address the facility's compliance with Standards .02 A Fire Safety Inspections and .03 C Health Inspections, at the next scheduled MCCS audit. After a thorough review of the secondary documentation for the non-compliant standard, the facility was found to be in compliance with all the standards for an Adult Correctional Institution. The Baltimore City Correctional Center is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Baltimore City Correctional Center. Facility Administrator Damilare Adisa-Thomas stated that he would like to use the opportunity to express his appreciation to the Commission. He extended appreciation to Acting Executive Director Veronica Moore for her assistance and patience during the compliance review. Facility Administrator Adisa-Thomas said that a lot was involved during the process due to COVID-19. He commented that although the process of utilizing a laptop to conduct the inventories was unconventional, it worked. Facility Administrator Adisa-Thomas expressed appreciation to the leadership of the Division of Correction for providing the technology that was needed in order for the facility to achieve total compliance with the standards. Facility Administrator Adisa-Thomas concluded his comments and expressed appreciation for the patience of the administration. He commented that it shows great leadership.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. There were no questions presented. Chairperson Reece said “kudos” to Facility Administrator Adisa-Thomas and his staff because they stuck with the process and their cooperation was greatly appreciated.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Commissioner Michael Resnick made a motion to approve the monitoring report and grant the Recognition of Achievement award and Assistant Attorney General Beverly Hughes seconded. The unanimous response of silence denoted the approval of the monitoring report and Recognition of Achievement award. The vote to approve the monitoring report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement. Deputy Secretary Wayne Hill and Acting Commissioner Annie Harvey abstained from the voting process.

- **PRINCE GEORGE’S COUNTY DEPARTMENT OF CORRECTIONS**

Senior Correctional Program Specialist Cheryle Moyer reported that a remote monitoring review was conducted of the Prince George’s County Department of Corrections. Due to the State’s Elevated Level II operational status as a result of COVID-19, the required documentation was electronically submitted to MCCS for review of the standards found in non-compliance at the initial audit conducted in January 2020. This was the first monitoring review since the audit. Assistant Division Chief Alecia Creighton (Audit Coordinator) electronically submitted the required documentation for the monitoring review and physical inventories were conducted remotely for the required standards to support accountability. The reviews of the non-compliant standards were conducted by Senior Correctional Program Specialist Cheryle Moyer, Correctional Program Specialist Regina Russell, and Auditor Brian Raivel. The results of the monitoring period from August 1, 2020 through February 1, 2021, were as follows: Standard .02 E (2) Emergency Medical Services was found to be compliance. The Prince George’s County Department of Corrections Transport Vehicle First Aid Kit Inventory forms were reviewed for the first aid kits located in the facility’s vehicles. The forms demonstrated that each vehicle’s first aid kit inventory matched the master listing of approved supplies and the contents were inventoried monthly by medical staff. A remote photographic inventory of the first aid kits was conducted on March 3, 2021. Photographs for the contents of the twelve vehicle first aid kits,

which displayed the contents of each, demonstrated an accurate accounting and inventory of the contents, as required by the standard. Standard .02 K (4) Control of Medical and Dental Instruments was found to be in compliance. Records of weekly inventories were reviewed for needles and syringes located in the dental department. An assessment of the documentation proved that weekly inventories were conducted on dental instruments and needles and syringes located in the Dental Department. A remote inventory was conducted of the dental instruments, needles, and syringes, on February 26, 2021, and cross-referenced with the inventory records. The documentation provided and the physical inventory of the dental instruments, needles and syringes demonstrated compliance with the standard for the monitoring period. Standard .04 A (3, 4) Toxic, Caustic and Flammables was found to be in compliance. A review was conducted of the Prince George's County Department of Corrections Toxic, Caustic and Flammable Materials Monthly Inventory Disposal forms. The form demonstrated that all used chemicals and chemical containers were properly disposed, during the monitoring period. The form indicates the date, quantity, size and name of the chemical or chemical container disposed of along with the name of the staff member, who disposed of the chemical/chemical container, as required by the standard. The records of issuance for the TCFs located in the Kitchen, Sanitation Supply Closet, Laundry room, Basement Supply Warehouse and Barber School were also reviewed and a remote physical inventory was conducted of the TCFs, in the areas listed. The inventory, inspections, issue and disposal forms indicate that the staff handling, issuing and disposing TCFs from these areas are meeting the requirements of the standard. Inspection reports were reviewed from other regulatory agencies. Dietary Menus were reviewed and approved on June 10, 2020 by Julia A. Dunnigan, Dietitian (License #86086847). A Maryland Occupational Safety Hazard Inspection (MOSH) Inspection was conducted on November 15, 2019 by George Penyak with noted violations. The violations were abated on December 30, 2019. A Fire Safety Inspection was conducted on November 30, 2020, with no violations noted. A Food Service Inspection was conducted by the Maryland Department of Health and Mental Hygiene on September 23, 2020, with noted violations. According to the Health Inspection Report Corrective Action Plan, all violations were abated by October 23, 2020. After a thorough review of the secondary documentation for the three non-compliant standards, the facility was found to be in total compliance with all the standards for an Adult Detention Center. The Prince George's County Department of Corrections is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Prince George's County Department of Corrections. Director Corenne Labbe' thanked the Standards Commission for the work that it does to ensure that the facility is in compliance with the COMAR standards. Director Labbe' commented that the standards also ensure that the facility is maintaining a humane environment for the detainees.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. There were no questions presented.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Director Terry Kokolis made a motion to approve the monitoring report and grant the Recognition of Achievement award and Deputy Secretary Wayne Hill seconded. The unanimous response of silence denoted the approval of the monitoring report and Recognition of Achievement award. The vote to approve the monitoring report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement.

- **PRINCE GEORGE'S COUNTY COMMUNITY RELEASE CENTER**

Senior Correctional Program Specialist Cheryle Moyer reported that a remote monitoring review was conducted of the Prince George's County Community Release Center. Due to the State's Elevated Level II operational status, as a result of COVID-19, the required documentation was electronically submitted to MCCS for review of the standards found in noncompliance at the initial audit conducted in January 2020. This was the first monitoring review since the audit. Acting Assistant Division Chief Alecia Creighton (Audit Coordinator) electronically submitted the required documentation for the remote monitoring review. The physical inventories were conducted remotely for the required standards to support accountability. The standards' compliance was assessed by Acting Executive Director Veronica Moore, Senior Correctional Program Specialist Cheryle Moyer, Correctional Program Specialist Regina Russell, and Auditor Brian Raivel. The results of the monitoring period of August 1, 2020 through February 1, 2021, were as follows: Standard .01 H (2) Search Procedures was in compliance. A review was conducted of the Community Release Center's Semi-Annual Shake-Down and Searches forms for the monitoring period. The forms contained the date, staff conducting the shake-down/search, areas searched, findings, action taken, comments and the signature and date for the Division Chief. The records confirmed that semi-annual searches of inmate living, program and activity areas were searched and the records were maintained during the monitoring period, as required by the standard. Standard .01 I (2, 3, 5) Key Control was found to be in compliance. The Prince George's County Community Release Center (CRC) has implemented the Keyper Management System for the issue, inventory and management of Key Control area, during the monitoring period. A review conducted of the Quarterly Key Inspection Logs provided information on the name of the Key Keeper, Key Number, Quantity and Key Confirmation inspected for the monitoring period. A review was also conducted of the CRC Issue and Return Key Logs for the daily inventories and issue and return records maintained during the monitoring period. The logs identified the Asset Name, Asset Description, User Name, Directions (In/Out), Removal Type, Cabinet/System location and the Time and Date. A remote physical inventory of the keys contained at the Prince George's County Community Release Center, was conducted on March 1, 2021 and demonstrated accountability. Based on the review of the records of quarterly inspections, daily inventories, issue and return records, and the remote physical inventory, the facility has proven compliance with the standard. Standard .02 C (5) Disaster Plans was found to be in compliance. The Prince George's County Quarterly Fire Drill reports for the monitoring period were submitted and reviewed. The reports listed the date and time the fire drills were completed, as required by the standard. It is strongly recommended that the fire drill reports are written in detail to include the date, time of the fire drill, areas covered during the fire drill, and explain the actions taken by staff during the fire drill process in the body of the report. The form should indicate that policy was followed and that the staff and inmates evacuated were familiar with their duties and responsibilities during an actual emergency. During the monitoring period, the facility was not occupied by residents, however, based on the documented fire drills, the facility is compliant with the standard. Standard .02 E (2) Emergency Medical Services was found to be in compliance. The Prince George's County Community Release Center's Monthly First Aid Kit Inventory List for Housing Unit Dorms 1-4, Maintenance Room, Lobby, Division Office, and Supply Closet were reviewed for the monitoring period. The forms identified the location, quantity, date inventoried, condition and inspection by, as well as the contents of the first aid kits. The forms demonstrate that the first aid

kit inventories matched the master listing of approved supplies, and the contents were inventoried monthly by medical staff, as required by the standard. A remote photographic inventory of the first aid kits was conducted, on March 3, 2021. The photographs, displaying the contents of each, and the inventory records demonstrated an accurate accounting of the contents, as required by the standard. Standard .02 J (3, 6) Control of Medications was found to be undetermined. The Prince George's County Community Release Center removed all residents in response to the COVID-19 pandemic, in April 2020. The facility has had no residents with medications, during the monitoring period; therefore, compliance could not be determined for the standard. Standard .02 O Physical Examinations was found to be undetermined. The Prince George's County Community Release Center removed all residents in response to the COVID-19 pandemic, in April 2020. The facility has had no residents to conduct physical examinations during the monitoring period; therefore, compliance could not be determined for the standard. Standard .04 A (2, 4) Toxic, Caustic and Flammable Materials was found to be compliant. The Prince George's County Community Release Center's chemical logs were submitted for the monitoring period. The logs demonstrate that Toxic, Caustic and Flammables Materials were issued as needed by staff members. The form lists the name of the TCF, beginning count, amount issued, amount added to count, ending count, Name of issuing staff member, and date issued. The Master List of the Community Release Center's TCF Inspection forms were reviewed. Other forms reviewed include; records of quarterly inspections/inventories for toxic, caustic and flammable materials. The forms listed the name of the TCF, the location, the quantity and date inventoried. It is recommended that a notation of condition be included on the form for staff documentation purposes, during the quarterly inspections. A remote physical inventory was conducted using pictures of TCFs located in the Community Release Center. The master listing of toxic, caustic and flammable materials was compared against the photo inventory to ascertain accountability. The review of the documentation and the remote physical inventory demonstrates that Prince George's County Community Release Center is maintaining control of TCFs, as required by the standard. Standard .04 B Weekly Facility Sanitation Inspections was found to be compliant. The Prince George's County Department of Corrections Sanitation and Safety Checklists for the Community Release Center were submitted and reviewed for the monitoring period. The forms demonstrated the comprehensive, thorough and regular inspection of all areas of the facility and grounds, to ensure compliance with health regulations and acceptable levels of sanitation by staff members. It included maintenance issues, the availability and condition of sanitation equipment; storage of perishables and dangerous materials; presence of vermin; disposal of refuse and overall cleanliness; along with any clutter/disarray. The reports reviewed, provide documentation that sanitation inspections are completed weekly for all areas of the facility, as required by the standard. Standard .05 F Inmate Orientation was found to be undetermined. The Prince George's County Community Release Center removed all residents in response to the COVID-19 pandemic, in April 2020. The facility has had no residents to conduct inmate orientations during the monitoring period; therefore, compliance could not be determined for the standard. Inspection reports were reviewed from other regulatory agencies. Dietary Menus were reviewed and approved on June 10, 2020 by Julia A. Dunnigan, Dietitian (License #86086847). A Maryland Occupational Safety Hazard Inspection (MOSH) Inspection was conducted on November 15, 2019 by George Penyak with noted violations. The violations were abated on December 30, 2019. A Fire Marshal Inspection was conducted on November 30, 2020, with no violations noted. A Food Service Inspection was conducted by the Maryland Department of Health and Mental Hygiene, on September 23, 2020, with noted violations. According to the Health Inspection Report Corrective Action Plan, all violations were abated, by

October 23, 2020. After a thorough review of the secondary documentation for the six non-compliant standards were found compliant and three non-compliant standards were undetermined. The facility has not been occupied with residents since April 2020. The facility was found to be in total compliance with all the standards for an Adult Community Correctional Facility. The Prince George's County Community Release Center is recommended to receive the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Prince George's County Community Release Center. Director Corenne Labbe' expressed thanks to Chairperson T.D. Reece, Acting Executive Director Veronica Moore and the audit team (to include Correctional Program Specialist Regina Russell and Auditor Brian Raivel) led by Senior Correctional Program Specialist Cheryle Moyer and the Commission as a whole. Director Labbe' remarked that she wanted to thank the Standards Commission staff for their patience during the P.G. County Community Release audit. Director Labbe' reported that the P.G. County Community Release Center opened in 2018. Director Labbe' commented that the staff was new and fairly new to the audit process. Director Labbe' commented that she would like to once again thank the audit team for their patience which was demonstrated throughout the audit process. Director Labbe' commented that the standards are in place to ensure that the facility maintains a humane environment for the detainees and residents that are incarcerated within the facility.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. Assistant Attorney General Beverly Hughes asked if it is correct that the facility no longer has residents. Director Labbe' stated that the facility no longer has residents. Assistant Attorney General Hughes asked if the facility is still open. Director Labbe' responded that the facility is open and the staff is there, however there are no residents. Assistant Attorney General Hughes asked what is the facility staff doing if there are no residents at the facility. Director Labbe' responded that most of the staff have been re-assigned to areas where there are vacancies. Director Labbe' stated that the managers are at the facility to ensure that the facility is being maintained. Director Labbe' also reported that there is re-entry staff in the facility who provides services for the returning citizens and also perform work in the facility in order to prepare those individuals who are returning to the community from the jail. Assistant Attorney General Hughes asked Director Labbe' when does she expect residents to return to the facility. Director Labbe' responded that residents are projected to return to the facility in the latter part of the summer or the beginning of fall. Chairperson Reece asked if this was the first audit of the community release center. Director Labbe's response was yes, this was the first audit for the community release center. Chairperson Reece raised a question regarding the categories that were deemed undetermined. Chairperson Reece asked if the indetermination was the result of missed information or the inaccuracy of information regarding a log. Director Labbe' deferred to Ms. Alecia Creighton (Audit Manager) to address the matter. Chairperson Reece inquired about the category deemed undetermined regarding the physical examinations. Ms. Alecia Creighton explained that Standard .02 O Physical Examinations was found to be undetermined because there were no residents in the facility, therefore the physical examinations

did not occur. Chairperson Reece cited that during the period of April 2018 until the COVID-19 pandemic there were residents at the community release center. Ms. Creighton explained that during the period cited by Chairperson Reece there were inmates at the community release center who received physical examinations. Director Labbe' commented that during the time in question, and before the community release center accepted residents, they were under the impression as they were becoming operational and still in the planning stages that the facility would not be audited for a couple of years. She stated that the administration was still in the planning stages of how they would be operating and during that time some of the documentation may not have been thoroughly done correctly. Director Labbe' added that the justification cited was where the community release center probably fell short. Chairperson Reece asked if the documentation has since been created to satisfy compliance with the standard. Director Labbe' responded that the documentation has absolutely been created and completed in order to satisfy the standard moving forward. Director Labbe' added that the documentation was being created during the audit. Ms. Alecia Creighton reported that she submitted the medical policy that covers the standards regarding control of medications and physical examinations.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the monitoring report and grant the Recognition of Achievement award. Deputy Secretary Wayne Hill made a motion to approved the monitoring report and grant the Recognition of Achievement award and Commissioner Mike Resnick seconded. The unanimous response of silence denoted the approval of the audit report and Recognition of Achievement award. The vote to approve the report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement.

6. ANNOUNCEMENTS

Chairperson T.D. Reece expressed his appreciation to the M CCS staff. Chairperson Reece remarked that the M CCS staff has done great work through the COVID-19 pandemic. Chairperson Reece stated that the staff has come up with creative ways to keep the standards going. Chairperson Reece commented that it is very critical in Maryland and in corrections as a whole to keep the standards at the forefront. Chairperson Reece stated that he has had many, many conversations with Acting Executive Director Veronica Moore and he has enjoyed all of the conversations and discussions regarding M CCS business. Chairperson Reece closed his remarks and stated that it is stellar work that has been performed by the M CCS staff to keep the audits on pace during the pandemic.

7. ADJOURNMENT

Chairperson T.D. Reece entertained a motion to adjourn the 274th Commission (Virtual) Meeting. Assistant Attorney General Beverly Hughes made a motion to adjourn the meeting and Deputy Secretary Wayne Hill seconded. The 274th Commission (Virtual) Meeting concluded at 11:20 a.m.